

Frequently Asked Questions about Dr. Hassell's Partnership Plans

Q: Do I still need to keep my health insurance and/or Medicare?

A: Yes, you will still need medical insurance for emergency room visits, hospitalization, specialists, prescriptions, lab processing, and all services provided/processed outside our office. Insurance plans that don't require a "gatekeeper" and use the Providence provider network will work best with our office, since we are out of network with all insurance companies.

Q: How does the partnership work if I am enrolled in a Medicare Advantage plan?

A: Drs. Hassell and Ellis are "opted out" of Medicare. If you are enrolled in a Medicare Advantage plan, your designated primary care physician will need to order services such as lab tests, cardiology testing, and diagnostic imaging, as **we are not participating providers**. Medicare supplement plans that don't require a "gatekeeper" and use the Providence network will work best with our office.

Q: Are you limiting the number of patients who can join?

A: Yes, membership will be limited, and will be offered to patients on a first-come, first-serve basis. Enrollment priority will be given to established patients.

Q: Will I be able to sign up for a Partnership Plan in the future?

A: We will need to limit the number of patients enrolled, but until that point existing patients will have priority in enrollment.

Q: Can I remain Dr. Hassell's patient if I am unable to pay the annual fee?

A: We realize there will be some who are unable to afford the annual fee. If that is your situation, you are welcome to remain a patient on the usual fee-for-service basis.

Q: If I join, how often can I see the doctor?

A: There are no limits on the number of times that you can be seen. The plan tiers reflect an anticipated level of need, based on your current health status.

Q: Can I make same day or next day appointments?

A: Yes, urgent appointments are available when medically necessary. Dr. Ellis will continue to be available to care for Dr. Hassell's patients when Dr. Hassell is unavailable, and vice versa.

Q: If I go to an emergency room, or see another doctor, will your plan cover my bill?

A: No. The annual fee ensures you have access to care provided by our office only. However, we will always be available for emergency phone calls and to act as your advisor.

Q: What about when the doctors are out of town or on vacation?

A: A physician will always be available, and after-hours calls to our office are forwarded to our cell phone.

Q: If I require more than anticipated medical services, will my annual fee increase?

A: Not for the contracted year.

Q: Is the cost of lab work covered by my annual fee?

A: No, but if we draw your labs, the draw fee is included in your partnership. The actual processing charges from the laboratory are not covered by your annual fee.

Q: What happens if I decide to cancel my membership?

A: Simply send us a written notice. The balance of your yearly fee will be prorated and refunded promptly.

Q: Can I extend coverage to family members?

A: They are welcome to either schedule a consultation appointment to enroll in their own plan, or be seen on a fee-for-service basis.

Q: Will Dr. Hassell be open to new patients?

A: Dr. Hassell will be available for a limited number of consultation visits with new patients who have a primary care provider. Current patients, of course, can continue to see Dr. Hassell for primary care on a fee-for-service basis if they prefer.

Q: Will Dr. Ellis be open to new patients?

A: Dr. Ellis will continue to be available for both new and current primary care patients on a fee-for-service basis.

Q: Are the Partnership Plans considered a type of health insurance?

A: No, the Partnership Plans are not considered health insurance and are not intended to replace any existing or future health insurance or health plan coverage that you may carry. The Partnership Plan services are limited and specified in the retainer medical agreement and members must pay for all non-specified services. The Department of Consumer and Business Services issued a certification to the practice and governs the way retainer medical practices work. For more information on retainer medical practices in the State or Oregon, see: www.insurance.oregon.gov, (888) 977-4894, or ordcbs.in@mail.state.or.us.

Q: Are the Partnership Plan annual fees tax deductible?

A: We recommend checking with your tax advisor for more information about tax qualifications.

Q: If I enroll in a Partnership Plan will you provide billing paperwork that I can submit to my insurer, HSA, FSA, etc.?

A: We will not be providing billing paperwork on a per visit basis; the retainer fee simplifies administration and covers the care provided by our office for the retainer period.

Q: How do I sign up for Dr. Hassell's Partnership Plan?

A: Please call our office at 503.291.1777 to schedule an in-person office visit or telephone consult with Dr. Hassell to determine which plan will be best for your health needs.

Q: Where can I learn more information?

A: Please visit www.goodfoodgreatmedicine.com or call our office at (503) 291-1777.